

Indiana State Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 005043	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 12/11/2014
NAME OF PROVIDER OR SUPPLIER ST JOSEPH HOSPITAL		STREET ADDRESS, CITY, STATE, ZIP CODE 700 BROADWAY FORT WAYNE, IN 46802		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
S 000	<p>INITIAL COMMENTS</p> <p>The visit was for investigation of two State hospital complaints.</p> <p>Complaint Number: IN 00153114 Unsubstantiated: Lack of sufficient evidence.</p> <p>Complaint Number: IN 00145617 Unsubstantiated: deficiency cited unrelated to the allegations</p> <p>Date: 12-10/11-14</p> <p>Facility Number: 005043</p> <p>Surveyor: Brian Montgomery, RN, BSN Public Health Nurse Surveyor</p>	S 000		
S 322	<p>410 IAC 15-1.4-1 GOVERNING BOARD</p> <p>410 IAC 15-1.4-1(c)(6)(H)</p> <p>(c) The governing board is responsible for managing the hospital. The governing board shall do the following:</p> <p>(6) Require that the chief executive officer develops policies and programs for the following:</p> <p>(H) Requiring all services to have policies and procedures that are updated as needed and reviewed at least triennially.</p> <p>This RULE is not met as evidenced by: Based on document review and interview, the facility failed to follow its grievance policy for 1 of 5 patients. (PT27)</p>	S 322		

Indiana State Department of Health

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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S 322	<p>Continued From page 1</p> <p>Findings:</p> <p>1. The policy/procedure Patient Grievance (reviewed 4-12) indicated the following: " All verbal and written complaints regarding abuse, neglect, patient harm or hospital compliance with COPs are grievances ...a grievance may include a situation where the patient or his or her representative phones the hospital with a concern that constitutes a grievance (i.e. the care provided to the patient ...) ...in the event a patient or the patient ' s family or representative have a comment, complaint, or grievance he/she is encouraged to ...request to speak with someone in administration ...the person documenting the receipt of the complaint/grievance describes/summarizes the complaint in the patient/patient representative ' s words as best as possible, places the date, the time, and the signature of the person completing the form as indicated ...grievances shall be tracked for the purpose of trending, improving the processes, and ensuring customer satisfaction and service recovery. "</p> <p>2. On 12-10-14 at 1000 hours, the risk manager A4 and chief quality officer A2 were requested to provide grievance documentation for PT27 during the period 1-01-14 through 3-31-14 and none was provided prior to exit.</p> <p>3. During an interview on 12-10-14 at 1015 hours, the chief nursing officer (CNO) indicated that he/she was familiar with care concerns for PT27 expressed by a patient representative during the hospital admission and indicated that several meetings were conducted with family members of PT27 including a meeting with administrative representatives to discuss care provided to the patient that was requested by a</p>	S 322		

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S 322	<p>Continued From page 2</p> <p>family member after the patient became nonresponsive and was discharged to a skilled nursing facility.</p> <p>4. On 12-11-14 at 0915 hours, risk manager A4 was requested to provide documentation for PT27 regarding a family meeting conducted on 2-24-14 with the chief nursing officer A1 and administrative director of critical care A5 to discuss patient care concerns related to the hospital stay 1-3/16-14 and none was provided prior to exit.</p> <p>5. During an interview on 12-11-14 at 1535 hours, the risk manager A4 confirmed that the facility failed to follow its policy/procedure and document the issues concerning PT27 's care as a grievance and confirmed that no other documentation was available.</p>	S 322		